1	NOTC CARRIE E. HURTIK, ESQ.	
2	Nevada Bar No. 7028	
3	RACHEL L. SHELSTAD, ESQ. Nevada Bar No. 13399	
4	HURTIK LAW & ASSOCIATES 7866 West Sahara Avenue	
5	Las Vegas, Nevada 89117 (702) 966-5200	
	(702) 966-5206 Facsimile	
6	Attorney for Debtors, ANTON CASHUS THOMAS and	
7	KATHERINE LEAH THOMAS	
8	UNITED STAT	TES BANKRUPTCY COURT
9	DIST	TRICT OF NEVADA
10		1
11	In re:) ANTON CASHUS THOMAS and)	Case No.: 16-12342
12	KATHERINE LEAH THOMAS,)	Chapter 7 Bankruptcy
13	Debtors.	· ·
14	NOTICE OF BA	NKRUPTCY PROCEEDINGS
15		Debtors, ANTON CASHUS THOMAS and KATHERINE
16		in accordance with Chapter 7 of the Bankruptcy Act, a true
17		o as Exhibit "A." In accordance with 11 U.S.C. § 362, all
18		
19	proceedings in this case in relation to the Del	·
20	DATED this 29 th day of April, 2016.	
		HURTIK LAW & ASSOCIATES
21 22	/s/	Carrie E. Hurtik
		CARRIE E. HURTIK, ESQ.
23		Nevada Bar No. 7028 7866 W. Sahara Avenue
24		Las Vegas, NV 89117 Attorney for Debtors,
25		ANTON CASHUS THOMAS and
26		KATHERINE LEAH THOMAS
27		
28		

Notice of Bankruptcy Proceedings - 1

1 CERTIFICATE OF SERVICE 2 STATE OF NEVADA) ss. 3 **COUNTY OF CLARK** 4 I, XIOMARA G. SUAREZ, declare: 5 I am a resident of and employed in Clark County, Nevada. I am over the age of eighteen years 6 and not a party to the within action. My business address is 7866 West Sahara Avenue, Las Vegas, 7 Nevada 89117. 8 9 On April 29, 2016, I served the document described as NOTICE OF BANKRUPTCY 10 **PROCEEDINGS** on the parties listed below: 11 Aon Hewitt c/o Bank of America 12 Mail Code: DE5-024-02-08 13 P.O. Box 15047 Wilmington, DE 19850 14 Telephone 1 (800) 556-6044 Facsimile (847) 554-1004 15 Richland Holdings, Inc. dba 16 AcctCorp of Southern Nevada 17 4955 S. Durango, Ste. 177 Las Vegas, NV 89113-0155 18 Telephone (702) 240-3007 Facsimile (702) 247-9802 19 20 Jerome R. Bowen, Esq. **BOWEN LAW OFFICES** 21 9960 W. Cheyenne Ave., Ste. 250 Las Vegas, NV 89129 22 Telephone (702) 240-5191 Facsimile (702) 240-5797 23 Constable's Office of 24 Henderson Township 25 243 Water Street Henderson, NV 89015 26 Telephone (702) 455-7940 Facsimile (702) 455-7942 27 28

X

X

VIA U.S. MAIL: by placing a true copy thereof enclosed in a sealed envelope with postage thereon fully prepaid, in the United States mail at Las Vegas, Nevada. I am "readily familiar" with the firm's practice of collection and processing correspondence by mailing. Under that practice, it would be deposited with the U.S. postal service on that same day with postage fully prepaid at Las Vegas, Nevada in the ordinary course of business. I am aware that on motion of the party served, service is presumed invalid if postal cancellation date or postage meter date is more than one day after date of deposit for mailing an affidavit.

VIA FACSIMILE: by transmitting to a facsimile machine maintained by the person on whom it is served at the facsimile machine telephone number as last given by that person on any document which he/she has filed in the cause and served on the party making the service. The copy of the document served by facsimile transmission bears a notation of the date and place of transmission and the facsimile telephone number to which transmitted. A confirmation of the transmission containing the facsimile telephone numbers to which the document(s) was/were transmitted will be maintained with the document(s) served.

I declare under penalty of perjury that the foregoing is true and correct. Executed at Las Vegas, Nevada, on April 29, 2016.

/s/ Xiomara G. Sanchez

XIOMARA G. SANCHEZ, an employee of HURTIK LAW & ASSOCIATES

EXHIBIT "A"

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEVADA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Anton	Katherine
	your government-issued picture identification (for	First name	First name
	example, your driver's	Cashus	Leah
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Tḥomas	Thomas
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0979	xxx-xx-6375

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	btor 1 Anton Cashus The btor 2 Katherine Leah Th		Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	I have not used any business name or EINs.	I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	3319 Popcorn Flower Street	If Debtor 2 lives at a different address:
		Las Vegas, NV 89117 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Clark County If your mailing address is different from the one above, fill it in here. Note that the court will send any	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this
		notices to you at this mailing address.	mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	btor 1 btor 2	Anton Cashus The Katherine Leah Th					Case number (if known)
Pai	ñ2	Tell the Court About \	our Ban	kruptcy C	ase		
7.	Bank	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.				
	cnoc	sing to file under	Chap	oter 7			
			☐ Chap	oter 11			
			☐ Chap	oter 12			
			☐ Chap	oter 13			
8.	How	you will pay the fee	ab or a p	oout how y der. If you pre-printed	ou may pay. Typica attorney is submitt address.	lly, if you are paying the fee young your payment on your beh	ck with the clerk's office in your local court for more details ourself, you may pay with cash, cashier's check, or money lalf, your attorney may pay with a credit card or check with
					y tne tee in installi ee in Installments (C		on, sign and attach the Application for Individuals to Pay
			_ bu	it is not rec oplies to yo	uired to, waive you ur family size and y	r fèe, and may do so only if yo ou are unable to pay the fee i	n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line tha n installments). If you choose this option, you must fill out cial Form 103B) and file it with your petition.
		M	and the second s				
9.	bank	you filed for ruptcy within the	No.				
	last 8	years?	☐ Yes.	5 :		14.0	Once annual co
				District		\ A #	Case number
				District	About the state of	When	Case number Case number
			•	District		vvnen	Case number
10.		ny bankruptcy s pending or being	■ No		***************************************		
	filed not fi	by a spouse who is ling this case with or by a business er, or by an	☐ Yes.				
				Debtor			Relationship to you
			•	District	440	When	Case number, if known
				Debtor			Relationship to you
				District	***************************************	When	Case number, if known
11.		ou rent your	■ No.	Go to	ine 12.		
	, 55101		☐ Yes.	Has yo	ur landlord obtaine	d an eviction judgment agains	t you and do you want to stay in your residence?
					No. Go to line 12.		
					Yes. Fill out <i>Initial</i> bankruptcy petition		Judgment Against You (Form 101A) and file it with this

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	otor 1 Anton Cashus Th		Case number (if known)
		•	
Par	Report About Any Bu	sinesses	You Own as a Sole Proprietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.
		☐ Yes.	Name and location of business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code
	it to this petition.		Check the appropriate box to describe your business:
			☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
			Stockbroker (as defined in 11 U.S.C. § 101(53A))
		•	Commodity Broker (as defined in 11 U.S.C. § 101(6))
			□ None of the above
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of s, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure .C. 1116(1)(B).
	For a definition of small	No.	I am not filing under Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Pari	Report if You Own or	Have Any	Hazardous Property or Any Property That Needs Immediate Attention
14.	Do you own or have any	No.	
	property that poses or is alleged to pose a threat	☐ Yes.	
	of imminent and		What is the hazard?
	identifiable hazard to public health or safety?	•	
	Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property? Number, Street, City, State & Zip Code

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Debtor 1 Anton Cashus TI Debtor 2 Katherine Leah 1		Case number (if known)
Part 5: Explain Your Efforts	to Receive a Briefing About Credit Counseling	
15. Tell the court whether you have received a briefing about credit counseling.	About Debtor 1: You must check one: I received a briefing from an approved credit counseling agency within the 180 days before filed this bankruptcy petition, and I received a certificate of completion.	About Debtor 2 (Spouse Only in a Joint Case): You must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate o completion.
The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.	Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. I received a briefing from an approved credit counseling agency within the 180 days before filed this bankruptcy petition, but I do not have a certificate of completion.	this bankruptcy petition, but I do not have a certificate of completion.
If you file anyway, the cour can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.	I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waive of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why	any. I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent
	you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15	copy of the payment plan you developed, if any. If you do
	days. I am not required to receive a briefing about credit counseling because of: Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after reasonably tried to do so. Active duty. I am currently on active military duty in a military combat zone. If you believe you are not required to receive a briefing about credit counseling, you must file a	makes me incapable of realizing or making rational decisions about finances. Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

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Answer These Questions for Reporting Purposes 18. What kind of debts do you have? 18. What kind of debts do you have? 18. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily to primarily on household purpose." 18. Are your debts primarily business debts? Business debts are debts that you incurred to obtain more your debts primarily business debts? Business debts are debts that you incurred to obtain more your debts primarily business debts? Business debts are debts that you incurred to obtain more your debts primarily business debts? Business debts are debts that you incurred to obtain more your debts are debts of business of investment. 18. No. Go to line 16. 19. Yes, Go to line 16. 19. Yes, Go to line 17. 19. I am not filling under Chapter 7. Go to line 18. 1am filling under Chapter 7. Do you seltinate that after any exempt property is excluded and administrative expenses are paid that funds will be available to unsecured recitions? 19. Yes, Go to line 19. 19. Yes,		otor 1 otor 2	Anton Cashus Th Katherine Leah Ti				Case number	(if known)	
16. What kind of debts do you have? 18. Are your febbs primarily can personal, family, or household purpose." 18. Are you felting under chebts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. 17. Are you filting under Chapter 7. Go to line 19. 18. Lam not filting under Chapter 7. Go to line 18. 19. Lam filting under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured or entitions? 19. How much to you estimate that you own administrative expenses are paid that funds will be available for distribution to unsecured or entitions? 19. How much to you estimate that you own administrative expenses are paid that funds will be available to distribute to unsecured or entitions? 19. How much to you setimate that you own administrative expenses are paid that your setimate your assests to be \$50.90 \cdots \cdot	Par	ii 6:	Answer These Quest	ions for R	eporting Purposes				
Pyes. Go to line 17.	ASSESSED AND	Wha		16a.				ed in 11 U.S.C. § 101(8) as "incurred by an	
160. Are your dicits primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Cot of the 17.					☐ No. Go to line 16b.				
money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Ges. Go to line 17.					Yes. Go to line 17.				
Yes, Go to line 17.				16b.					
17. Are you filling under Chapter 7. Go to line 18. 17. Are you filling under Chapter 7. Go to line 18. 17. Are you filling under Chapter 7. Go to line 18. 18. Do you estimate that after any exempt property is excluded and administrative expense are paid that funds will be available for distribution to unsecured creditors? 18. How many Creditors do you estimate that you over the paid that funds will be available for distribution to unsecured creditors? 19. How many Creditors do you estimate that you over the paid that funds will be available for distribution to unsecured creditors? 19. How much do you estimate that you over the paid to the paid that funds will be available to distribute to unsecured creditors? 19. How much do you settimate your assets to be worth? 20. How much do you settimate your liabilities to be? 21. How much do you settimate your liabilities to be? 22. How much do you settimate your liabilities to be? 23. Soo,001 - \$100,000 \$100,000					☐ No. Go to line 16c.				
17. Are you filing under Chapter 7. Go to line 18. 17. Are you estimate that after any exempt property is excluded and administrative expense are paid that funds will be available to distribute to unsecured creditors? 18. How many Creditors do you estimate that you over estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 20. How much do you estimate your flabilities to be? 21. So, 50,000					☐ Yes. Go to line 17.				
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after any exempt property is excluded and administrative expanses are paid that funds will be available to distribute to unsecured creditors? 18. How many Creditors do you estimate that you owe? 19. How much do you estimate that you estimate that you over the property of the property	17.			□ No.	I am not filing under Chapter 7. (Go to line 18.			
are paid that funds will be available for distribution to unsecured creditors? 18. How many Creditors do you estimate that you sestimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your labilities to be? 19. How much do you estimate your labilities to be? 19. How much do you estimate your labilities to be? 19. How much do you estimate your labilities to be? 19. How much do you estimate your labilities to be? 19. How much do you estimate your labilities to be? 19. How much do you estimate your labilities to be? 19. Stoppoll of the your labilities to be your labilities to be? 19. Stoppoll of the your labilities to be your labilities to be? 19. Stoppoll of the your labilities to be your labilities to be? 19. Stoppoll of the your l	after a prope		any exempt	Yes.	I am filing under Chapter 7. Do y are paid that funds will be availa	ou estimate that a ble to distribute to	after any exempt prope ounsecured creditors?	rty is excluded and administrative expenses	
be available for distribution to unsecured creditors? 18. How many Creditors do you estimate that you owe? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your liabilities to be? 19. Sto, 000				•	■ No				
you estimate that you owe? 50.99		be available for distribution to unsecured			☐ Yes				
100-199	18.			□ 1-49				25,001-50,000	
19. How much do you estimate your assets to be worth? So S50,001 S100,000 S10,000,001 S10 million S10,000,001 S10 billion S50,000 S10,000,001 S10 million S50,000 S10,000,001 S10 million S10,000,001 S10 billion S10,000,001 S10 billion S10,000,001 S10 billion S10,000,000 S100,000 S100				50-99					
estimate your assets to be worth? \$50,001 - \$100,000						□ 10,001-25,	000	☐ More than100,000	
be worth? S50,001 - \$100,000	19.	How	much do you	s \$0 - \$5	50,000				
Soo,001 - \$1 million									
estimate your liabilities to be? \$50,001 - \$100,000									
The be? Solution Stout	20.			□ \$0 - \$5	50,000				
Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. if no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. Isl Anton Cashus Thomas Anton Cashus Thomas Signature of Debtor 1 Executed on April 28, 2016 Executed on April 28, 2016			•	` ` `	•				
I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. Isl Anton Cashus Thomas Anton Cashus Thomas Signature of Debtor 1 Executed on April 28, 2016 Executed on April 28, 2016									
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United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. if no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. Isl Anton Cashus Thomas Anton Cashus Thomas Signature of Debtor 1 Executed on April 28, 2016	For	you		I have exa	amined this petition, and I declare	under penalty of	perjury that the informa	ation provided is true and correct.	
document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. Isl Anton Cashus Thomas Anton Cashus Thomas Signature of Debtor 1 Executed on April 28, 2016 Executed on April 28, 2016				If I have c United Sta	hosen to file under Chapter 7, I a ates Code. I understand the relief	m aware that I ma available under e	ay proceed, if eligible, u each chapter, and I cho	nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.	
I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. Isl Anton Cashus Thomas Anton Cashus Thomas Signature of Debtor 1 Executed on April 28, 2016 Executed on April 28, 2016				if no attori document	ney represents me and I did not p , I have obtained and read the no	pay or agree to par stice required by 1	y someone who is not a 1 U.S.C. § 342(b).	an attorney to help me fill out this	
bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571. Isl Anton Cashus Thomas Anton Cashus Thomas Signature of Debtor 1 Executed on April 28, 2016 April 28, 2016 Executed on April 28, 2016				I request r	elief in accordance with the chap	ter of title 11, Unit	ted States Code, specif	fied in this petition.	
Isl Anton Cashus Thomas Anton Cashus Thomas Anton Cashus Thomas Signature of Debtor 1 Executed on April 28, 2016 Katherine Leah Thomas Signature of Debtor 2 Executed on April 28, 2016				bankrupto	y case can result in fines up to \$2	ncealing property, 250,000, or impris	or obtaining money or onment for up to 20 year	property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,	
Signature of Debtor 1 Signature of Debtor 2 Executed on April 28, 2016 Executed on April 28, 2016				/s/ Antor	n Cashus Thomas				
******				Executed	on April 28, 2016 MM / DD / YYYY				

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Debtor 2 Katherine Leah T		Cas	e number (if known)
	•		
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have e that I have delivered to the d	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	ledge after an inquiry that the information in the
, 5	/s/ Carrie E. Hurtik	Date	April 28, 2016
	Signature of Attorney for Debtor	MINI (1914 P. L. 1917) AND CONTROL OF THE PROPERTY OF THE PRO	MM / DD / YYYY
	Carrie E. Hurtik		
	Printed name		
	Hurtik Law & Associates		
	Firm name		
	7866 W. Sahara Avenue		
	Las Vegas, NV 89117		
	Number, Street, City, State & ZIP Code		
	Contact phone 702-966-5200	Email address	churtik@hurtiklaw.com
	7028		
	Bar number & State		CONTROL CONTRO

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HIII	in this inform	ation to identify your	case:	2.7				
Deb	tor 1	Anton Cashus Th						
		First Name	Middle N	lame	Last Name			
	tor 2 use if, filing)	Katherine Leah T	homas Middle N	Jame	Last Name			
(Opor	ise ii, iiirigj	1 not reame			Edot Hame			
Unit	ed States Ban	kruptcy Court for the:	DISTRICT	OF NEVADA				
Cas	e number							
(if kno	materia.			accommon				Check if this is an
							a	mended filing
○tt	icial Earm	106E/E						
	icial Form		ha Haya	Uncontro	d Claima			12/15
		F: Creditors W				Part 2 for creditors with NO	NODIODITY -I-	
any e Sche Sche eft. A name	xecutory contra dule G: Executo dule D: Credito attach the Conti	acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sect inuation Page to this pag ber (if known).	that could resified Leases (Oured by Propere. If you have i	ult in a claim. Also ifficial Form 106G) rty. If more space i no information to i	o list executory of . Do not include is needed, copy	contracts on Schedule A/B: any creditors with partially the Part you need, fill it out, do not file that Part. On the	Property (Offici secured claims number the en	al Form 106A/B) and on that are listed in tries in the boxes on the
n administration		of Your PRIORITY Un						
	-	s have priority unsecured	d claims again	st you?				
	No. Go to Pa	rt 2.						
	Yes.							
Par	2 List All	of Your NONPRIORIT	Y Unsecured	l Claims	***************************************			
3. [Do any creditor	s have nonpriority unsec	ured claims ag	gainst you?				
l	☐ No. You have	nothing to report in this pa	art. Submit this	form to the court wit	th your other sche	edules.		
	Yes.							
t	insecured claim.	list the creditor separately	for each claim.	. For each claim list	ed, identify what t	holds each claim. If a credi ype of claim it is. Do not list c three nonpriority unsecured o	laims already inc	luded in Part 1. If more
								Total claim
4.1	Aargon C	Collection Agen		Last 4 digits of ac	count number	2671		\$500.00
	3025 W S			When was the de	bt incurred?	Opened 9/01/14		
	Number Stre	eet City State Zlp Code		As of the date you	u file, the claim i	s: Check all that apply		
		ed the debt? Check one.		_				
	☐ Debtor 1	•		Contingent				
	Debtor 2	only		☐ Unliquidated				
	Debtor 1	and Debtor 2 only		☐ Disputed				
		one of the debtors and ano		Type of NONPRIC	KITY unsecured	ı cıaım:		
		this claim is for a comm	unity	☐ Student loans				
	debt Is the claim	subject to offset?		Dbligations aris		ration agreement or divorce the	iat you did not	
	■ No	•				g plans, and other similar deb	ts	
	Yes			Other Specify	Collection A	Attorney Spring Valley	/ Hospital	
	,	•		- Other, Specify				

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	Anton Cashus Thomas Katherine Leah Thomas		Case number (if know)				
4.2	Aargon Collection Agen	Last 4 digits of account number	7710	\$323.00			
	Nonpriority Creditor's Name 3025 W Sahara Las Vegas, NV 89102	When was the debt incurred?	Opened 2/01/15				
Ī	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecured	i claim:				
	☐ Check if this claim is for a community debt	Student loans					
	s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	☐ Yes	Other. Specify Collection I	Attorney Spring Valley Hospital				
	Aargon Collection Agen	Last 4 digits of account number	4730	\$303.00			
	Nonpriority Creditor's Name 3025 W Sahara	When was the debt incurred?	Opened 3/01/10				
	as Vegas, NV 89102	As of the date you file, the claim is: Check all that apply					
	Number Street City State ZIp Code Nho incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply				
_	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
_	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
_	At least one of the debtors and another	•	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans					
C	lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No No	☐ Debts to pension or profit-sharing	g plans, and other similar debts				
	☐Yes	Other. Specify Collection A	Attorney Nevada Energy				
	Aargon Collection Agen	Last 4 digits of account number	3691	\$253.00			
3	Nonpriority Creditor's Name 8025 W Sahara Las Vegas, NV 89102	When was the debt incurred?	Opened 10/01/14				
1	Number Street City State Zlp Code Vho incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply				
[Debtor 1 only	☐ Contingent					
	Debtor 2 only	Unliquidated					
Ε	Debtor 1 and Debtor 2 only	☐ Disputed					
E	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:				
	Check if this claim is for a community	☐ Student loans					
	lebt s the claim subject to offset?	☐ Obligations arising out of a separ report as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not				
-	No	Debts to pension or profit-sharing	plans, and other similar debts				
	⊒ Yes	, , ,	attorney Spring Valley Hospital				
L	id tes	Other. Specify	tuoniey opining valley mospital				

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Debtor Debtor	1 Anton Cashus Thomas 2 Katherine Leah Thomas		Case number (if know)			
4.5	Aargon Collection Agen	Last 4 digits of account number	3336	\$155.00		
ana americano de la constitución	Nonpriority Creditor's Name 3025 W Sahara Las Vegas, NV 89102	When was the debt incurred?	Opened 8/01/14			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	Unliquidated .				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	,	Attorney Summerlin Hospital			
4.6	Aargon Collection Agen	Last 4 digits of account number	5427	\$152.00		
	Nonpriority Creditor's Name 3025 W Sahara Las Vegas, NV 89102	When was the debt incurred?	Opened 12/01/14			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?		Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	No	Debts to pension or profit-sharing	plans, and other similar debts			
	□ Yes	•	Attorney Summerlin Hospital			
4.7	Aargon Collection Agen	Last 4 digits of account number	3855	\$45.00		
	Nonpriority Creditor's Name 3025 W Sahara Las Vegas, NV 89102	When was the debt incurred?	Opened 2/01/16			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only ☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:			
	☐ Check if this claim is for a community ☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ration agreement or divorce that you did not			
	No.	Debts to pension or profit-sharing	plans, and other similar debts			
	☐Yes	Other. Specify Collection A	ttornov Summorlin Hospital			

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	Anton Cashus Thomas Katherine Leah Thomas		Case number (if know)			
	Aargon Collection Agen	Last 4 digits of account number	8200	\$25.00		
	Nonpriority Creditor's Name 3025 W Sahara Las Vegas, NV 89102	When was the debt incurred?	Opened 3/01/15			
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
1	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
I	☐ Yes	Other. Specify Collection	Attorney Spring Valley Hospital			
	Acctcorp Of Southern N	Last 4 digits of account number	92N1	\$2,002.00		
	Nonpriority Creditor's Name 4955 S Durango Dr Ste 17 Las Vegas, NV 89113	When was the debt incurred?	Opened 12/01/09 Last Active 12/29/10			
1	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
I	Debtor 1 only	☐ Contingent				
I	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
[At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:			
	Check if this claim is for a community	☐ Student loans				
	debt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
[☐ Yes	Collection Attorney Victory Village Apartments				
0	Ad Astra Recovery Serv	Last 4 digits of account number	4119	\$257.00		
7	Nonpriority Creditor's Name 7330 W 33rd St N Ste 118 Wichita, KS 67205	When was the debt incurred?	Opened 2/01/10 Last Active 1/07/11			
1	Number Street City State Zlp Code Nho incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply			
£	Debtor 1 only	☐ Contingent				
I	Debtor 2 only	☐ Contingent ☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ Deptor 1 and Deptor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:			
	At least one of the debtors and another Check if this claim is for a community	☐ Student loans				
d	☐ Check if this claim is for a community lebt steep to the claim subject to offset?		ration agreement or divorce that you did not			
	No No	☐ Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other Specify Collection A	Attornev Rapid Cash 10			
_	- ,	Other Specify				

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	1 Anton Cashus Thomas 2 Katherine Leah Thomas		Case number (if know)	
4.1	Allied Coll	Last 4 digits of account number	9001	\$754.00
house and a second	Nonpriority Creditor's Name 3080 S. Durango Road, Las Vegas, NV 89117	When was the debt incurred?		
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharing	• •	
	Yes	Other. Specify Med1 02 Wi	Iliam B Isaacs Md	
4.1	Allied Coll	Last 4 digits of account number	7501	\$116.00
	Nonpriority Creditor's Name 3080 S. Durango Road, Las Vegas, NV 89117	When was the debt incurred?		
,	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed	alaima	
	At least one of the debtors and another	Type of NONPRIORITY unsecured Student loans	ciaim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ation agreement of divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Med1 02 Pe	arle Vision Sahara	
4.1	Allied Coll	Last 4 digits of account number	4001	\$104.00
	Nonpriority Creditor's Name 3080 S. Durango Road,	When was the debt incurred?		
-	Las Vegas, NV 89117 Number Street City State Zlp Code	As of the date you file, the claim is	: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separ report as priority claims	ation agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Med1 02 Last		
	169	Utner. Specify		

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	Anton Cashus Thomas Katherine Leah Thomas		Case number (if know)	
4	Americollect	Last 4 digits of account number	8636	\$82.00
•	Vonpriority Creditor's Name 1851 S Alverno Roa Manitowoc, WI 54221	When was the debt incurred?		
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
I	Debtor 1 only	☐ Contingent		
!	Debtor 2 only	☐ Unliquidated		
l	Debtor 1 and Debtor 2 only	☐ Disputed		
Į.	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans	vertice accompant as diverses that you did not	
	is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No No	Debts to pension or profit-sharing	g plans, and other similar debts	
I	Yes	Other. Specify Med1 02 Ra	adiology Assoc Of Nevada	
	Byl Collection Service	Last 4 digits of account number	2583	\$28.00
3	lonpriority Creditor's Name 801 Lacey Street West Chester, PA 19382	When was the debt incurred?	Opened 1/01/12	
1	Nest Citester, FA 13302 Jumber Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only ☐ Contingent			
	☐ Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed			
_				
[At least one of the debtors and another	Type of NONPRIORITY unsecured	f claim:	
ſ	Check if this claim is for a community	☐ Student loans		
	lebt s the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Collection A Other Specify Corporation		
0 ,	Capital One Bank Usa N	Last 4 digits of account number	4977	\$444.00
1	Ionpriority Creditor's Name 5000 Capital One Dr	When was the debt incurred?	Opened 5/01/14 Last Active 12/05/14	
7	Richmond, VA 23238 Jumber Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
-	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another			
	Check if this claim is for a community	☐ Student loans		
d	ebt s the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		

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Debtor 1 Debtor 2	Anton Cashus Thomas Katherine Leah Thomas	Case number (if know)	
	Centennial Hills Hospital	Last 4 digits of account number 9360	\$2,467.79
(Nonpriority Creditor's Name 5900 N. Durango Dr. Las Vegas, NV 89149	When was the debt incurred?	
1	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
[At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
I	No No	Debts to pension or profit-sharing plans, and other similar debts	
(☐Yes	Other. Specify Medical	
0 ;	Centennial Hills Hospital	Last 4 digits of account number 2725	\$245.04
6	Nonpriority Creditor's Name Attn: Financial Counselor 6900 N. Durango Drive	When was the debt incurred?	
	_as Vegas, NV 89149 Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Ī	Debtor 1 only	☐ Contingent	
[Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
[At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
d	lebt	\square Obligations arising out of a separation agreement or divorce that you did not	
_	s the claim subject to offset?	report as priority claims	
	No No	\square Debts to pension or profit-sharing plans, and other similar debts	
[Yes	Other. Specify Medical	
9	Centennial Hills Hospital	Last 4 digits of account number 9028	\$446.95
F	lonpriority Creditor's Name Attn: Financial Counselor 1900 N. Durango Drive	When was the debt incurred?	
	as Vegas, NV 89149		
	lumber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
-	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	ebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other Specify Medical	
-		Onici. Specify	

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	Anton Cashus Thomas Katherine Leah Thomas	Case number (if know)			
4.2	Check City	Last 4 digits of account number	x979	Unknown	
	Nonpriority Creditor's Name 5861 W. Craig Road	When was the debt incurred?			
	Las Vegas, NV 89130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
1	debt Is the claim subject to offset?	Obligations arising out of a sepa	ration agreement or divorce that you did not		
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify payday loan	n		
3	Commonwealth Financial	Last 4 digits of account number	56N1	\$307.00	
:	Nonpriority Creditor's Name 245 Main St Dickson City, PA 18519	When was the debt incurred?	Opened 2/01/16		
٦	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i			
	Debtor 1 only				
	☐ Debtor 2 only ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	f claim:		
	Check if this claim is for a community	☐ Student loans			
(debt is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	Mo No	Debts to pension or profit-sharing	g plans, and other similar debts		
1	□ Yes	Other Specify Physicians	Attorney Shadow Emergency		
2 !	Comnwith Fin	Last 4 digits of account number	34N1	\$311.00	
:	Nonpriority Creditor's Name 245 Main St Dickson City, PA 18519	When was the debt incurred?			
7	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:		
	At least one of the deptors and another Check if this claim is for a community	☐ Student loans			
(☐ Check if this claim is for a community debt s the claim subject to offset?		ration agreement or divorce that you did not		
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
_	□ Yes	Other Specify Med1 02 En	ncare Center Emergency Phys		
•		— Other. Specify			

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	1 Anton Cashus Thomas 2 Katherine Leah Thomas		Case number (if know)	
4.2	Dignity Health	Last 4 digits of account number	7828	\$691.26
	Nonpriority Creditor's Name 8280 W. Warm Springs Rd.	When was the debt incurred?	2016	
	Las Vegas, NV 89113 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated	•	
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify medical		
4.2	Dignity Health	Last 4 digits of account number	2199	\$650.01
	Nonpriority Creditor's Name 8280 W. Warm Springs Rd. Las Vegas, NV 89113	When was the debt incurred?	2016	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
	No	·	y pians, and other similar debts	
	Yes	Other Specify medical		
4.2 5	Diversified Consultant	Last 4 digits of account number	9693	\$1,073.00
	Nonpriority Creditor's Name 10550 Deerwood Park Blvd Jacksonville, FL 32256	When was the debt incurred?	Opened 1/01/16	
-	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	a plane, and other similar debts	
	■ No		• •	
	☐ Yes	Other. Specify Collection A	Automey Sprint	
_				

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Debtor Debtor	1 Anton Cashus Thomas 2 Katherine Leah Thomas		Case number (if know)	
4.2 6	Dollar Loan Center - Riverpark	Last 4 digits of account number	x979	Unknown
	Nonpriority Creditor's Name 6122 W. Sahara Avenue Las Vegas, NV 89146	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	f claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other, Specify pay day loa	n	
4.2	Enhanced Recovery Co L	Last 4 digits of account number	9956	\$181.00
	Nonpriority Creditor's Name 8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?	Opened 1/01/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	™ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Collection	Attorney Tmobile	
4.2	First Premier Bank	Last 4 digits of account number	3782	\$300.00
	Nonpriority Creditor's Name 601 S Minnesota Ave Sioux Falls, SD 57104	When was the debt incurred?	Opened 4/01/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separ	ation agreement or divorce that you did not	
	No No	Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
		· · · · · · · · · · · · · · · · · · ·		

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	1 Anton Cashus Thomas 2 Katherine Leah Thomas		Case number (if know)		
4.2	Fremont Emergency Service	Last 4 digits of account number	2840	\$65.26	
- Anna Anna Anna Anna Anna Anna Anna Ann	Nonpriority Creditor's Name 9301 S. Western Avenue	When was the debt incurred?	2016		
	Oklahoma City, OK 73139-2728 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	rration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify medical			
4.3	Harris	Last 4 digits of account number	4271	\$2,884.00	
	Nonpriority Creditor's Name 111 West Jackson B	When was the debt incurred?			
	Chicago, IL 60604 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	,			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not		
	No No	☐ Debts to pension or profit-sharing	• •		
	Yes	Other. Specify Med1 02 Uh	s Summerlin Hospital Medic		
4.3	Harris	Last 4 digits of account number	4867	\$2,723.42	
	Nonpriority Creditor's Name 111 West Jackson B Chicago II 60604	When was the debt incurred?			
	Chicago, IL 60604 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt		ns arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	a plane, and other similar debts		
	No	•			
	Yes	Other. Specify Med1 02 Uh	s Summerlin Hospital Medic		

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	1 Anton Cashus Thomas 2 Katherine Leah Thomas	·	Case number (if know)	
4.3	I C System Inc	Last 4 digits of account number	3181	\$945.00
	Nonpriority Creditor's Name Po Box 64378	When was the debt incurred?	Opened 12/01/15	
	Saint Paul, MN 55164	when was the dept mouned:	Opened 12/01/10	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	t alatas.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	o plans, and other similar debts	
	ESSEN INO	, .	Attorney Cox	
	☐ Yes	Other Specify Communic	ations-Las Vegas	
4.3	Infectious Disease Associates	Last 4 digits of account number	8642	\$75.58
3	Nonpriority Creditor's Name	- Last 4 digits of account number		
	1450 W. Horizon Ridge Pkwy B304-668	When was the debt incurred?	2015	
	Las Vegas, NV 89102 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	debt Is the claim subject to offset?			
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	☐ Yes	Other. Specify medical		
4.3	Medical Industry Services Inc.	Last 4 digits of account number	1804	\$72.22
4	Nonpriority Creditor's Name	Last 4 digits of account number		
	8170 W. Sahara Ave. Suite 106 Las Vegas, NV 89117-1981	When was the debt incurred?	2015	
	Number Street City State Zlp Code	As of the date you file, the claim is	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent		
	•	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	plans, and other similar debts	
		•	•••	
	☐ Yes	Other. Specify medical		

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	r 1 Anton Cashus Thomas r 2 Katherine Leah Thomas	Case number (if know)		
4.3 5	Plusfour Inc	Last 4 digits of account number 3937	\$53.00	
	Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim:		
		Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify Med1 02 Desert Radiologists		
4.3 6	Plusfour Inc.	Last 4 digits of account number 4605	\$333.00	
	Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120	When was the debt incurred? Opened 9/01/15		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Collection Attorney Desert Radiology Solutions		
4.3		0400	\$296.00	
7	Plusfour Inc. Nonpriority Creditor's Name	Last 4 digits of account number 8460	\$250.00	
	6345 S Pecos Rd Ste 212 Las Vegas, NV 89120	When was the debt incurred? Opened 11/01/13		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	No			
	□ Yes	Other. Specify Collection Attorney Desert Radiologists		
	LI Yes	was Other. Specify Contestion Attention Description		

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Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 she claim subject to offset? Nonpriority Creditor's Name 6345 S Pecos Rd Ste 6345 S Pecos	Debtoi Debtoi	Anton Cashus Thomas Katherine Leah Thomas		Case number (if know)		
Sa45 S Pecos Rd Ste 212 Las Vegas, NV 89120 Number Street (it) State Zip Code Who incurred the debt? Check one. Debtor 1 only Confingent Debtor 2 only Uniquidated Debtor 2 only Uniquidated Debtor 3 and Debtor 2 only Uniquidated Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Sa55.00 Confingent Debtor 3 and Debtor 3 only Confingent Debtor 3 and Debtor 3 only Confingent Debtor 4 only Check if this claim is for a community debt Sa55.00 Confingent Sa55.00 Confingent Sa55.00 Confingent Sa55.00 Confingent Sa55.00 Confingent Confingent Sa55.00 Confingent			Last 4 digits of account number	1894	\$39.00	
Number Street City State Zip Code No incurred the debt? Check one. Debtor 1 only Contingent Debtor 2 only Distinguished Debtor 2 only Distinguished Debtor 2 only Distinguished Debtor 1 and Debtor 2 only Disputed Disputed Disputed Debtor 2 only	handaras to moreover.	6345 S Pecos Rd Ste 212	When was the debt incurred?	Opened 4/01/14		
Debtor 2 only		Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply		
Debtor 1 and Debtor 2 only		☐ Debtor 1 only	☐ Contingent			
At least one of the debtors and another Check if this claim is for a community debt Student loans Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations arising out of a separation agreement or divorce that you did not report as priority claims Collegations a		Debtor 2 only	☐ Unliquidated			
Check if this claim subject to offset? State 212		☐ Debtor 1 and Debtor 2 only	☐ Disputed			
Check if this claim is for a community dot State claim subject to offset? Contingent Check if this claim is for a community dot Check if this claim subject to offset? Contingent Check if this claim subject to offset? Contingent Check if this claim is for a community dot Contingent Contingent Check if this claim is for a community dot Contingent Conting		☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts		☐ Check if this claim is for a community	☐ Student loans			
Additional Plusfour Inc. Last 4 digits of account number 1812 S35.00		debt		aration agreement or divorce that you did not		
Plusfour Inc. Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120 Number Street City State Zip Code Who incurred the debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 stee claim subject to offset? Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120 At least one of the debtors and another Check if this claim is for a community debt Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120 Number Street City State Zip Code When was the debt incurred? Opened 7/01/14 As of the date you file, the claim is: Check all that apply Contingent Unliquidated Debts of a separation agreement or divorce that you did not report as priority claims Student loans Others. Specify Others. Specify Collection Attorney Desert Radiologists Opened 8/01/13 As of the date you file, the claim is: Check all that apply Opened 8/01/13 As of the date you file, the claim is: Check all that apply Opened 8/01/13 As of the date you file, the claim is: Check all that apply Opened 8/01/13 As of the date you file, the claim is: Check all that apply Opened 8/01/13 Op		■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NN 98120 As of the date you file, the claim is: Check all that apply Contingent Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Collection Attorney Desert Radiologists		Yes	Other. Specify Collection	Attorney Desert Radiologists		
Sa45 S Pecos Rd Ste 212 Las Vegas, NV 89120 As of the date you file, the claim is: Check all that apply			Last 4 digits of account number	1812	\$35.00	
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only		6345 S Pecos Rd Ste 212	When was the debt incurred?	Opened 7/01/14		
Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 least one of the debtors and another Debtor 4 only Debtor 5 only Debtor 6 NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 NONPRIORITY unsecured claim: Debtor 6 NONPRIORITY unsecured claim: Debtor 7 only Debtor 8 only 1 only			As of the date you file, the claim	is: Check all that apply		
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts No Debts to pension or profit-sharing plans, and other similar debts Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120 Number Street City State Zip Code Who incurred the debt? Check one. Debts 10 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Disputed Type of NONPRIORITY unsecured claim: Contingent Disputed Type of NONPRIORITY unsecured claim: Student loans Contingent Debtor 1 only Debtor 1 only Debtor 1 only Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Student loans Disputed Disputed Disputed Disputed Disputed Debtor 1 on of the debtors and another Student loans Debts a separation agreement or divorce that you did not report as priority claims No Collection Attorney Dermatology		Who incurred the debt? Check one.				
Debtor 1 and Debtor 2 only		☐ Debtor 1 only	☐ Contingent			
At least one of the debtors and another Student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising plans, and other similar debts Other. Specify Collection Attorney Desert Radiologists		Debtor 2 only	☐ Unliquidated			
Student loans Student loans Student loans Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising plans, and other similar debts Collection Attorney Dermatology		Debtor 1 and Debtor 2 only	•			
Check if this claim is for a community debt Check if this claim is for a community debt Collection Attorney Desert Radiologists		At least one of the debtors and another		d claim:		
Is the claim subject to offset? No		-				
Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection Attorney Desert Radiologists Last 4 digits of account number Opened 8/01/13 As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No No No Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Desert Radiologists Station Attorney				ration agreement or divorce that you did not		
Plusfour Inc. Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120 As of the debt incurred? Opened 8/01/13 As of the claim is: Check all that apply When was the debt incurred? Opened 8/01/13 As of the date you file, the claim is: Check all that apply Vegas, NV 89120 As of the date you file, the claim is: Check all that apply Debtor 1 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Dermatology		<u>.</u>		g plans, and other similar debts		
Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No No No Last 4 digits of account number Job			•	• •		
Nonpriority Creditor's Name 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No When was the debt incurred? Opened 8/01/13 As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Type of NONPRIORITY unsecured claim: Student loans Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Dermatology		Plusfour Inc.	Last 4 digits of account number	3130	\$25.00	
Number Street City State ZIp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply Contingent Unliquidated Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Dermatology		6345 S Pecos Rd Ste 212	When was the debt incurred?	Opened 8/01/13		
Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Check if this claim is for a community debt Street claim subject to offset? No Disputed Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Dermatology		Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Dermatology		Debtor 1 only	☐ Contingent			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Dermatology		Debtor 2 only				
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt ☐ Is the claim subject to offset? ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Collection Attorney Dermatology						
☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Dermatology		•	•	l claim:		
Is the claim subject to offset? report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts Collection Attorney Dermatology			☐ Student loans			
Collection Attorney Dermatology		debt		ration agreement or divorce that you did not		
☐ Yes Collection Attorney Dermatology Management Llc		■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
		Yes	Collection A Manageme	Attorney Dermatology nt Llc		

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Debtor 1 Debtor 2	Anton Cashus Thomas Katherine Leah Thomas		Case number (if know)	
	Quest Diagnostics	Last 4 digits of account number	7786	\$396.17
	Nonpriority Creditor's Name PO Box 740351 Cincinnati, OH 45274-0351	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
:	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	f claim:	
	Check if this claim is for a community	☐ Student loans		
	debt is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
1	☐ Yes	Other. Specify medical		
4.4	Rapid Cash	Last 4 digits of account number	x979	Unknown
:	Nonpriority Creditor's Name 2801 W. Washington Las Vegas, NV 89101	When was the debt incurred?		
ī	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
1	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
l	At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	Check if this claim is for a community	Student loans		
ı	debt s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify payday loar	1	
	Richland Holdings, Inc.	Last 4 digits of account number	6887	\$3,199.06
4	Nonpriority Creditor's Name AcctCorp of Southern Nevada 1955S. Durango, Suite #177	When was the debt incurred?		
ī	_as Vegas, NV 89113 Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim is	s: Check all that apply	
ĺ	Debtor 1 only	☐ Contingent		
[Debtor 2 only	☐ Unliquidated		
I	Debtor 1 and Debtor 2 only	☐ Disputed		
1	At least one of the debtors and another	Type of NONPRIORITY unsecured	claim:	
	Check if this claim is for a community	☐ Student loans		
c	lebt	Obligations arising out of a separ	ration agreement or divorce that you did not	
_	s the claim subject to offset?	Debts to pension or profit-sharing	plans, and other similar debts	
Ĺ	Yes	Other. Specify Garnishmer	16	

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	1 Anton Cashus Thomas 2 Katherine Leah Thomas		Case number (if know)	
4	Southern Hills Hospital & Medical Center	Last 4 digits of account number	7857	\$1,085.00
	Nonpriority Creditor's Name P.O. Box 99400 Louisville, KY 40269	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	_		
	Debtor 2 only	Contingent		
		Unliquidated		
	Debtor 1 and Debtor 2 only Disputed At least one of the debtors and another Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify medical		
4.4 5	Southern Hills Hospital & Medical Center	Last 4 digits of account number	7857	\$1,135.00
	Nonpriority Creditor's Name P.O. Box 99400 Louisville, KY 40269	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	Check if this claim is for a community	☐ Student loans		
	debt	☐ Obligations arising out of a sepa		
	Is the claim subject to offset?	report as priority claims		
	No.	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify medical		
4.4	Spring Valley Hospital Medical			
6	Center	Last 4 digits of account number	5109	\$128.54
	Nonpriority Creditor's Name 5400 S. Rainbow Blvd.	When was the debt incurred?		
	Las Vegas, NV 89118 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	-		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		

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	1 Anton Cashus Thomas 2 Katherine Leah Thomas		Case number (if know)	
1 i	Spring Valley Hospital Medical Center	Last 4 digits of account number	2599	\$498.60
	Nonpriority Creditor's Name 5400 S. Rainbow Blvd.	When was the debt incurred?		
	Las Vegas, NV 89118 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: Check if this claim is for a community Student loans		l claim:	
•	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	Mo No			
1	☐ Yes	Other. Specify Medical		
, 0	Summerlin Hospital Medical Center	Last 4 digits of account number	0959	\$8,702.97
	Nonpriority Creditor's Name P.O. Box 31001-0827 Pasadena, CA 91110-0827	When was the debt incurred?	2016	
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply		
,	Who incurred the debt? Check one.			
l	Debtor 1 only	☐ Contingent		
1	Debtor 2 only	Unliquidated		
1	Debtor 1 and Debtor 2 only	and Debtor 2 only		
1	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
1	Check if this claim is for a community	☐ Student loans		
	debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
i	No	\square Debts to pension or profit-sharing plans, and other similar debts		
i	Yes	Other. Specify medical		
J	Summerlin Hospital Medical Center	Last 4 digits of account number	8804	\$10,017.10
	Nonpriority Creditor's Name 357 Town Center Drive	When was the debt incurred?		
I	Las Vegas, NV 89144			
	Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
_	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
_	Debtor 2 only	☐ Unliquidated		
_	Debtor 1 and Debtor 2 only	☐ Disputed	La fatana	
	At least one of the debtors and another	Type of NONPRIORITY unsecured	ı cıaım:	
	Check if this claim is for a community	Student loans	enting agreement of divorce that you did not	
	lebt s the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	□ Yes	Other. Specify Medical		
•		- Otres, opening		

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Debtor 1 Anton Cashus Thomas Debtor 2 Katherine Leah Thomas		Case number (if know)			
Summerlin Hospital Medical Center	er Last 4 digits of account number	4983	\$5,352.18		
Nonpriority Creditor's Name 657 Town Center Drive Las Vegas, NV 89144	When was the debt incurred?				
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration agreement or divorce that you did not			
■ No	Debts to pension or profit-shari	Debts to pension or profit-sharing plans, and other similar debts			
Yes	Other. Specify Medical				
Part 3: List Others to Be Notified About a D					
5. Use this page only if you have others to be notified is trying to collect from you for a debt you owe to have more than one creditor for any of the debts the notified for any debts in Parts 1 or 2, do not fill out	someone else, list the original creditor i hat you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the collection agency	nere. Similarly, if you		
Name and Address	On which entry in Part 1 or Part 2 did you				
Spring Valley Hospital Medical		☐ Part 1: Creditors with Priority Unsecured Clain			
Center 5400 S. Rainbow Blvd.		Part 2: Creditors with Nonpriority Unsecured C	Claims		
Las Vegas, NV 89118					
	Last 4 digits of account number	5021			
Name and Address Spring Valley Hospital Medical	On which entry in Part 1 or Part 2 did you Line 4.4 of (Check one):	u list the original creditor? Part 1: Creditors with Priority Unsecured Clain	ns		
Center 5400 S. Rainbow Blvd.	8	Part 2: Creditors with Nonpriority Unsecured C	Claims		
Las Vegas, NV 89118	Last 4 digits of account number	7635			
N Add	On which entry in Part 1 or Part 2 did you	List the original creditor?			
Name and Address Spring Valley Hospital Medical		Part 1: Creditors with Priority Unsecured Clain	ns		
Center		Part 2: Creditors with Nonpriority Unsecured C	Claims		
5400 S. Rainbow Blvd.					
Las Vegas, NV 89118	Last 4 digits of account number	4294			
Name and Address	On which entry in Part 1 or Part 2 did you				
Summerlin Hospital Medical Center		Part 1: Creditors with Priority Unsecured Clain			
657 Town Center Drive		Part 2: Creditors with Nonpriority Unsecured C	Claims		
Las Vegas, NV 89144	Last 4 digits of account number	0797			
Name and Address	On which entry in Part 1 or Part 2 did you				
Summerlin Hospital Medical Center		Part 1: Creditors with Priority Unsecured Clain			
657 Town Center Drive		Part 2: Creditors with Nonpriority Unsecured C	Claims		
Las Vegas, NV 89144	Last 4 digits of account number	5799			
Name and Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?			
Summerlin Hospital Medical Center	Line 4.5 of (Check one):	Part 1: Creditors with Priority Unsecured Clain			
657 Town Center Drive		Part 2: Creditors with Nonpriority Unsecured C	Claims		
Las Vegas, NV 89144	Last 4 digits of account number	5543			
Name and Address Summerlin Hospital Medical Center	On which entry in Part 1 or Part 2 did you Line 4.6 of (Check one):	ulist the original creditor? Part 1: Creditors with Priority Unsecured Clain	ns		

Official Form 106 E/F

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657 Town Center Drive	Part 2: Creditors with Nonpriority Unsecured Claims	
Las Vegas, NV 89144	Last 4 digits of account number	5062
Name and Address	On which entry in Part 1 or Part 2 d	d you list the original creditor?
Summerlin Hospital Medical Center	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
657 Town Center Drive Las Vegas, NV 89144		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	9046

6a. Domestic support obligations 6a. 0.00 Total claims 6b. 0.00 Taxes and certain other debts you owe the government from Part 1 0.00 6c. Claims for death or personal injury while you were intoxicated Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 0.00 Total Priority. Add lines 6a through 6d. 6e. **Total Claim** 6f. 0.00 Student loans Total claims Obligations arising out of a separation agreement or divorce that from Part 2 0.00 6g. you did not report as priority claims 6h. 0.00 Debts to pension or profit-sharing plans, and other similar debts Other. Add all other nonpriority unsecured claims. Write that amount 6i. 50,277.15 Total Nonpriority. Add lines 6f through 6i. 6j. 50,277.15 Case 16-12342-abl Doc 1 Entered 04/28/16 17:31:26 Page 61 of 63

Anton Cashus Thomas Katherine Leah Thomas 3319 Popcorn Flower Street Las Vegas, NV 89117

Carrie E. Hurtik Hurtik Law & Associates 7866 W. Sahara Avenue Las Vegas, NV 89117

Aargon Collection Agen Acct No xxxxxx8200 3025 W Sahara Las Vegas, NV 89102

Acct corp Of Southern N Acct No xxxx92N1 4955 S Durango Dr Ste 17 Las Vegas, NV 89113

Ad Astra Recovery Serv Acct No xxx4119 7330 W 33rd St N Ste 118 Wichita, KS 67205

Allied Coll Acct No xxxxx4001 3080 S. Durango Road, Las Vegas, NV 89117

Americollect Acct No xxxx8636 1851 S Alverno Roa Manitowoc, WI 54221

Byl Collection Service Acct No xxx2583 301 Lacey Street West Chester, PA 19382

Capital One Bank Usa N Acct No xxxxxxxxxxx4977 15000 Capital One Dr Richmond, VA 23238

Centennial Hills Hospital Acct No xxxx9028 Attn: Financial Counselor 6900 N. Durango Drive Las Vegas, NV 89149

Check City Acct No xxxxxxx979 5861 W. Craig Road Las Vegas, NV 89130 Case 16-12342-abl Doc 1 Entered 04/28/16 17:31:26 Page 62 of 63

Commonwealth Financial Acct No xxxxxxx56N1 245 Main St Dickson City, PA 18519

Comnwlth Fin
Acct No xxxxxxx34N1
245 Main St
Dickson City, PA 18519

Dignity Health Acct No xxxx2199 8280 W. Warm Springs Rd. Las Vegas, NV 89113

Diversified Consultant Acct No xxxx9693 10550 Deerwood Park Blvd Jacksonville, FL 32256

Dollar Loan Center - Riverpark Acct No xxxxxx979 6122 W. Sahara Avenue Las Vegas, NV 89146

Enhanced Recovery Co L Acct No xxxx9956 8014 Bayberry Rd Jacksonville, FL 32256

First Premier Bank Acct No xxxx3782 601 S Minnesota Ave Sioux Falls, SD 57104

Fremont Emergency Service Acct No xxxxxx2840 9301 S. Western Avenue Oklahoma City, OK 73139-2728

Harris Acct No xxxx4867 111 West Jackson B Chicago, IL 60604

I C System Inc Acct No xxxx3181 Po Box 64378 Saint Paul, MN 55164

Infectious Disease Associates Acct No 8642 1450 W. Horizon Ridge Pkwy B304-668 Las Vegas, NV 89102 Case 16-12342-abl Doc 1 Entered 04/28/16 17:31:26 Page 63 of 63

Medical Industry Services Inc. Acct No x1804 8170 W. Sahara Ave. Suite 106 Las Vegas, NV 89117-1981

Plusfour Inc Acct No xxx3937 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120

Plusfour Inc. Acct No xxx3130 6345 S Pecos Rd Ste 212 Las Vegas, NV 89120

Quest Diagnostics Acct No xxxxxx7786 PO Box 740351 Cincinnati, OH 45274-0351

Rapid Cash Acct No xxxxxxxx979 2801 W. Washington Las Vegas, NV 89101

Rent

Richland Holdings, Inc. Acct No xxx-xx6887 AcctCorp of Southern Nevada 4955S. Durango, Suite #177 Las Vegas, NV 89113

Santander Consumer Usa Acct No xxxxxxxxxxxx1000 Po Box 961245 Ft Worth, TX 76161

Southern Hills Hospital & Medical Center Acct No xxxxxxx7857 P.O. Box 99400 Louisville, KY 40269

Spring Valley Hospital Medical Center Acct No xxxx4294 5400 S. Rainbow Blvd. Las Vegas, NV 89118

Summerlin Hospital Medical Center Acct No xxxx9046 657 Town Center Drive Las Vegas, NV 89144

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MODE = MEMORY TRANSMISSION

START=APR-29 14:38

END=APR-29 15:13

FILE NO.=105

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002	OK	₫ 7022479802	033/033	00:05:03
003	BUSY	<u>a</u> 702240579	000/033	00:00:00
004	OK	5 7024557942	033/033	00:04:40

-HURTIK LAW

**** e-STUDIO190F ******* -

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1
    NOTC
     CARRIE E. HURTIK, ESQ.
    Nevada Bar No. 7028
     RACHEL L. SHELSTAD, ESQ.
    Nevada Bar No. 13399
     HURTIK LAW & ASSOCIATES
    7866 West Sahara Avenue
     Las Vegas, Nevada 89117
 5
     (702) 966-5200
     (702) 966-5206 Facsimile
    Attomey for Debtors,
ANTON CASHUS THOMAS and
KATHERINE LEAH THOMAS
 6
 7
 8
                              UNITED STATES BANKRUPTCY COURT
 9
                                       DISTRICT OF NEVADA
10
                                                   Case No.:
                                                                16-12342
11
     In re:
     ANTON CASHUS THOMAS and
                                                   Chapter 7 Bankruptcy
     KATHERINE LEAH THOMAS,
12
13
                  Debtors.
14
                            NOTICE OF BANKRUPTCY PROCEEDINGS
15
           NOTICE IS HEREBY GIVEN that Debtors, ANTON CASHUS THOMAS and KATHERINE
16
    LEAH THOMAS, filed a petition for relief in accordance with Chapter 7 of the Bankruptcy Act, a true
17
     and correct copy of which is attached hereto as Exhibit "A." In accordance with 11 U.S.C. § 362, all
18
     proceedings in this case in relation to the Debtors are stayed.
19
           DATED this 29th day of April, 2016.
20
                                            HURTIK LAW & ASSOCIATES
21
                                            Carrie E. Hurtik
22
                                            CARRIE E. HURTIK, ESQ.
23
                                            Nevada Bar No. 7028
                                            7866 W. Sahara Avenue
Las Vegas, NV 89117
24
                                            Attorney for Debtors,
25
                                            ANTON CASHUS THOMAS and
                                            KATHERINE LEAH THOMAS
26
27
28
                                      Notice of Bankruptcy Proceedings - 1
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Case 16-12342-abl Doc 11 Entered 05/02/16 09:55:23 Page 35 of 35 START=APR-29 16:19 END=APR-29 16:25 MODE = MEMORY TRANSMISSION FILE NO.=107 PAGES DURATION STATION NAME/EMAIL ADDRESS/TELEPHONE NO. STN COMM. NO. 033/033 00:05:33 001 OK **57022405797** -HURTIK LAW **** e-STUDIO190F ********* -... ******** _ **** NOTC CARRIE E. HURTIK, ESQ. 2 Nevada Bar No. 7028 RACHEL L. SHELSTAD, ESQ. Nevada Bar No. 13399 HURTIK LAW & ASSOCIATES 7866 West Sahara Avenue Las Vegas, Nevada 89117 5 (702) 966-5200 (702) 966-5206 Facsimile Attorney for Debtors, ANTON CASHUS THOMAS and 6 7 KATHERINE LEAH THOMAS 8 UNITED STATES BANKRUPTCY COURT 9 DISTRICT OF NEVADA 10 11 Case No.: 16-12342 ANTON CASHUS THOMAS and 12 KATHERINE LEAH THOMAS, Chapter 7 Bankruptcy 13 Debtors. 14 NOTICE OF BANKRUPTCY PROCEEDINGS 15 NOTICE IS HEREBY GIVEN that Debtors, ANTON CASHUS THOMAS and KATHERINE 16 LEAH THOMAS, filed a petition for relief in accordance with Chapter 7 of the Bankruptcy Act, a true 17 and correct copy of which is attached hereto as Exhibit "A." In accordance with 11 U.S.C. § 362, all 18 proceedings in this case in relation to the Debtors are stayed. 19 DATED this 29th day of April, 2016. 20 **HURTIK LAW & ASSOCIATES** 21 /s/ Carrie E. Hurtik 22

23

24

25

26 27 28

CARRIE E. HURTIK, ESQ. Nevada Bar No. 7028 7866 W. Sahara Avenue Las Vegas, NV 89117 Attorncy for Debtors, ANTON CASHUS THOMAS and KATHERINE LEAH THOMAS

Notice of Bankruptcy Proceedings - 1